

Application Data Sheet

### Application Information

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: GUIDO  
Middle Name::  
Family Name:: BAUMOLLER  
City of Residence:: LEICHLINGEN  
State or Province of Residence::  
Country of Residence:: GERMANY  
Street of Mailing Address:: AM TREPPCHEN 5  
  
City of Mailing Address:: LEICHLINGEN  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: D-42799  
  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: ROLF  
Middle Name::  
Family Name:: KAWA  
City of Residence:: MONHEIM  
State or Province of Residence::  
Country of Residence:: GERMANY  
Street of Mailing Address:: FONTANESTRASSE 28  
  
City of Mailing Address:: MONHEIM  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: D-40789

Applicant Authority Type::	Inventor
Primary Citizenship Country::	GERMANY
Status::	Full Capacity
Given Name::	STEPHAN
Middle Name::	
Family Name::	EICHHORN
City of Residence::	GERNSHEIM
State or Province of Residence::	
Country of Residence::	GERMANY
Street of Mailing Address::	TANNENSTRASSE 25

City of Mailing Address:: GERNSEIM  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: D-64579

Applicant Authority Type::	Inventor
Primary Citizenship Country::	GERMANY
Status::	Full Capacity
Given Name::	ROLAND
Middle Name::	
Family Name::	SPORER
City of Residence::	KORSCHENBROICH
State or Province of Residence::	
Country of Residence::	GERMANY
Street of Mailing Address::	AM KERPER WEIHER 11

City of Mailing Address:: KORSCHENBROICH  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: D-41352

### Correspondence Information

Correspondence Customer Number:: 000466

**Representative Information**

Representative Customer Number::	000466
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional of	60/262,367	1/19/01

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**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

**Assignment Information**

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::